Kathleen Hartnett White, Chairman R. B. "Ralph" Marquez, Commissioner Larry R. Soward, Commissioner Margaret Hoffman, Executive Director



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

Protecting Texas by Reducing and Preventing Pollution

March 22, 2004

Mr. Jay Spence, Project Manager Ensafe, Inc. 4545 Fuller Drive, Suite 230 Irving, TX 75038

Re:

Delfasco Forge Division, Delfasco, Inc., located at 114 NE 28th Street, Grand Prairie, Dallas County, TX; Voluntary Cleanup Program (VCP) No. 1571

Dear Mr. Spence:

The Texas Commission on Environmental Quality (TCEQ) has received the amended VCP application and agreement. Enclosed is a copy of the amended agreement for your files. The Affected Property Assessment Report (APAR) is due on December 10, 2004. A project manager will be assigned to the site once the APAR has been received.

Please reference VCP No.1571 on the front of any future letters or reports. Future submittals should be mailed to my attention at the TCEQ, Voluntary Cleanup Section, MC-221, at the letterhead address. You may contact me with any questions at (512) 239-5696.

Sincerely,

Diana Lee Christiano, Program Specialist

Voluntary Cleanup Section

Remediation Division

DC/ts

Enclosure

cc: Ms. Lynda Riekels, Delfasco, Inc., Hurst, TX (w/enclosure)

Mr. Matthew J. Knifton, Thompson & Knight, Austin, TX (w/enclosure)

APPLICABLE RULES AND REGULATIONS

The VCP rules, 30 Texas Administrative Code (TAC) 333, Subchapter A and the following rules or regulations are specifically designated as being directly applicable for the Site and must be followed. Citation of these rules does not imply that they are the only applicable rules.

Х	30 TAC 350	(Texas Risk Reduction Program Rules - TRRP)
	30 TAC 334 Other	(Petroleum Storage Tank Rules)
	Out.	SUBMITTALS AND SCHEDULES
r., c	-11	damenta anno included a ideale. VCD an Vincina incluie A anno an an tao l
		ad reports were included with the VCP application, in this Agreement, or has been to this Agreement:
x	Phase I Enviro	nmental Site Assessment (ESA)
		ed Phase II ESA
		erty Assessment Report - Texas Risk Reduction Program (TRRP) Rules
	_	on Plan (TRRP)
	Other;	
		aforementioned rules or regulations, the required submittals shall include a monthly
		escribes all activities completed for the current month and those planned for the
-		order to complete the voluntary cleanup activities which are necessary for Certificate
		ce, the following plans and reports will be submitted according to the schedule
speci	fied below (put a	nticipated date of submittal of report in blanks or NA if not applicable):
-		
	P Submittals:	
		sessment ReportDecember 10, 2004
-		n June 30, 2005
		mpletion Report June 30, 2006
		ectiveness Reports _Semi-annually beginning December 15, 2006
		n Completion ReportsFour months after TCEQ approval of RAERs
		t will be submitted by the 15th of each month.
Ume	r reports (or maic	ate if attached Exhibit B):
If the		
	Applicant is self	implementing to Remedy Standard A. a completed TCEO Form 10323 (Self-
-	100 mg	-implementing to Remedy Standard A, a completed TCEQ Form 10323 (Self- e) must be attached to this Agreement. If the Applicant is self-implementing, TCEO
Will T	ementation Notice	e) must be attached to this Agreement. If the Applicant is self-implementing, TCEQ
	ementation Notice of review or con	e) must be attached to this Agreement. If the Applicant is self-implementing, TCEQ nment on site-specific issues submitted by the Applicant prior to submittal of the
Resp	ementation Notice not review or com- onse Action Com-	e) must be attached to this Agreement. If the Applicant is self-implementing, TCEQ nment on site-specific issues submitted by the Applicant prior to submittal of the upletion Report (RACR) or the Response Action Effectiveness Report if the RACR
Resp has n	ementation Notice not review or com- onse Action Com- not been previousl	e) must be attached to this Agreement. If the Applicant is self-implementing, TCEQ nment on site-specific issues submitted by the Applicant prior to submittal of the appletion Report (RACR) or the Response Action Effectiveness Report if the RACR by submitted.
Resp has n Petro	ementation Notice tot review or com- tonse Action Com- tot been previously deum Storage Tan	e) must be attached to this Agreement. If the Applicant is self-implementing, TCEQ nment on site-specific issues submitted by the Applicant prior to submittal of the upletion Report (RACR) or the Response Action Effectiveness Report if the RACR by submitted. ack Submittals:
Resp has n Petro Relea	ementation Notice not review or com- onse Action Com- not been previouslableum Storage Tan- ase Determination	e) must be attached to this Agreement. If the Applicant is self-implementing, TCEQ ment on site-specific issues submitted by the Applicant prior to submittal of the upletion Report (RACR) or the Response Action Effectiveness Report if the RACR by submitted. Submittals: Report (TCEQ-0621)
Resp has n Petro Relea Asse	ementation Notice not review or com- onse Action Com- not been previouslableum Storage Tar- ase Determinationssment Report F	e) must be attached to this Agreement. If the Applicant is self-implementing, TCEQ ment on site-specific issues submitted by the Applicant prior to submittal of the upletion Report (RACR) or the Response Action Effectiveness Report if the RACR by submitted. Submittals: Report (TCEQ-0621) Torm (TCEQ-0562)
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Form TCEQ-10241 Revised 3,

OFFICE USE ONLY PCA number: VCP Project number:

GIN 1505815

TEXAS COMMISSION ON ENVIRONMENTAL OUALITY

VOLUNTARY CLEANUP PROGRAM
Program Application VCP No. 1571
Please complete this form, a Texas Commission on Environmental Quality (TCEQ) Form 10400 and an
agreement form to request assistance and review from TCEQ staff in the Voluntary Cleanup Program
(VCP) pursuant to §361.604 of the Texas Solid Waste Disposal Act. You may download this document,
TCEQ Form 10400 and any other VCP documents via the Internet at
http://www.tceq.state.tx.us/permitting/remed/vcp/vcp/html.
Complete <u>all</u> applicable sections. The TCEQ may reject incomplete or inaccurate applications as per §361.605 of the VCP statute. To accurately complete this form, please refer to the VCP Application Instructions or call the TCEQ's Voluntary Cleanup Section at (512) 239-5891 with any questions concerning the completion of this form.
General Site Information RECEIVED
Site Name DEL PASCO FORGE DIVISION DEL PASCO, INC. MAR - 4 2003
Site Size (acres) 1.1008 VOLUNTARY CLEANUP SECTIO
Regulated Entity Reference No. (if issued): CN
Applicant(s)
Applicant A (The person or entity seeking review and approval of a plan or report and/or issuance of a VCP Certificate of Completion by the TCEQ. Applicant A is responsible for payment of TCEQ costs of review and oversight unless indicated otherwise on page 2 of this form). Applicant Delfasco Folder Division Delfasco, TNC.
Contact Person Lynda Riekels Title Vice President
Customer Reference No. (if issued): CN-
Organization Phone (817) 268 - 6781 Fax (817) 268 - 6783
Interest in Property OWNER_
To receive copies of TCEQ correspondence? Yes x No
Applicant B
ApplicantTitle
Customer Reference No. (if issued): CN-
Customer Reference No. (if issued): CN- Organization Phone Fax ()
Interest in Property
To receive copies of TCEQ correspondence? YesNo

Applicant C				
Applicant				
Contact Person	Title			
Customer Reference No. (if issued): CN				
Organization Phone (AL WANTE
Interest in Property				
To receive copies of TCEQ correspondence? Yes	sNo			
If more than three applicants, list others under "Addit	tional Applica	ants" on 1	page 8 of this	form.
Current Site Owner (if different from an	applicant)			
Owner(s)				
Contact Person				
Organization				
Other Contacts (Consultant/Attorney)				
Name(s) FO HEARS	Title _	PROJECT	MANAGER	
Name(s) FD MEARS Organization ENSAFE INC. (CONSULTANT)	Title _ Phone (97	PROJECT 12) 791-3	MANAGER 222 Fax A	12) 791-0405
Organization ENSAFE INC. (CONSULTANT) Address 4545 FULLER PRIVE SUITE 230	Phone (97	12)791-3	222 Fax (1	12)791-0405
Organization ENSAFE INC. (CONSULTANT)	Phone (97	12)791-3	222 Fax (1	12)791-0405
Organization ENSAFE INC. (CONSULTANT) Address 4545 FULLER PRIVE SUITE 230 City IRVING State	Phone (97	Z	ip Code75	72) 791-0405
Organization ENSAFE INC. (CONSULTANT) Address 4545 FULLER PRIVE SUITE 230 City IRVING State Name(s)	Phone (97	Z	222 Fax (1)	12) 791-0405 038
Organization ENSAFE INC. (CONSULTANT) Address 4545 FULLER PRIVE SUITE 230 City IRVING State Name(s) Organization	Phone (97 Tx Title Phone (Z	222 Fax (1)	12) 791-0405 038
Organization ENSAFE INC. (CANSULTANT) Address 4545 FULLER PRIVE SUITE 230 City IRVING State Name(s) Organization Address	Phone (97 Tx Title Phone (2) 791-3 Z	Fax (1)	02) 791-0405 038
Organization ENSAFE INC. (CONSULTANT) Address 4545 FULLER PRIVE SUITE 230 City IRVING State Name(s) Organization	Phone (97 Tx Title Phone (2) 791-3 Z	Fax (1)	02) 791-0405 038
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Organization ENSAFE INC. (CANSULTANT) Address 4545 FULLER PRIVE SUITE 230 City IRVING State Name(s) Organization Address City State Billing Information	Phone (97	Z	ip Code75	38
Organization ENSAFE INC. (CANSULTANT) Address 4545 FULLER PRIVE SUITE 230 City IRVING State Name(s) Organization Address City State Billing Information If billing should be directed to a person other than Ap	Tyx Title Phone (2) 791-3 Z	ip CodeFax (nformation b
Organization ENSAFE INC. (CANSULTANT) Address 4545 FULLER PRIVE SUITE 230 City IRVING State Name(s) Organization Address City State Billing Information	Tyx Title Phone (2) 791-3 Z	ip CodeFax (nformation b
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Current Property Use (Use percentage if site is divided into different use categories.)
Residential Other (e.g., agricultural, recreational)
Non-residential X If non-residential, type of business VACANT
Is a real estate transaction imminent for this site? YesNo_X
Latitude/Longitude
Latitude (degrees, min., sec. N or decimal degrees) 32.7503 Longitude (degrees, min., sec. W or decimal degrees) - 96.9629
Date of collection 9 5 02. Organization providing collection data COMSULTANT
Check the method used to determine latitude and longitude:
GPS - Real Time Differentially Corrected
GPS - Post Processed Differentially Corrected
Map Interpolation - Manual ✓ Map Interpolation - Digital Uses Jucy 1, 1986
✓ Map Interpolation - Digital Uses συζη, 1986 DOQQ
If using GPS, please state professional unit brand name, model number and accuracy tolerances.
If using Map Interpolation, please state which USGS quad map was used for interpolation.
If using DOQQ Interpolation, please state which DOQQ was used for interpolation.
Does the latitude and longitude listed above refer to the
X Center of the property?
Main entrance to the property?
Other, please describe
VCP Eligibility and Involvement With Other Regulatory Programs
Is the site subject to a TCEQ permit or administrative order? Yes No _X Have response actions been initiated at the site after April 1996? Yes No _X Note: Response actions initiated after April 1996 may cause the applicant to become ineligible for the VCP. Has a state or federal Notice of Violation or any other notice of enforcement action been issued relating to contamination at the site? Yes No _x Has there been any prior contact with any state or federal environmental regulatory programs or agencies relating to environmental issues at this site? Yes _x No

If yes, please describe all pr				
agencies which relate to each	•			•
OCTOBER 24, 2002 : DELF		E PHASE IS ESA BY EN		DETASIA PROVIDED
JANUARY 13, 2003 : DELFA				4 TCFQ SUMMERZING
STATUS OF INVESTIG				
Is a request for reimburseme	nt pre-approv	val currently under re-	view by the Petroleum	Storage Tank (PST)
Program? Yes No _2		,	•	
If yes, then please describe t	he site's stat	us in the PST Program	m	
				•
Please provide any and all sincluding any solid waste reregistration numbers which have contaminated Media. Have contaminants been der Please check the chemicals caffected:	egistration, lenave been ass a and Contected in on-	eaking petroleum sto signed	entNo	S, RCRIS, UIC, etc.
Contaminant Category	Soil	Groundwater	Surface Water	Sediment
*VOCs		×		
*SVOCs				
*Heavy Metals				
*Chlorinated Solvents		X		
Pesticides				

TPH

PCBs

Other

^{*}Please describe VINYL CHLORIDE: 1, 1-DCE: CIS- 1,2-DCE: TEE; 1,2-TCA; BENZENE; POF

Appli	cant's Intended Response Action Objectives (Cleanup Levels)
	Not known at this time. Applicant wishes to receive guidance from the VCP prior to the signing of a VCP agreement.
Texas l	Risk Reduction Program Rules (30 TAC Chapter 350) - Check Appropriate Standard and evel:
	Self-Implemented Cleanup to Remedy Standard A, Tier 1 Tier 2 Tier 3
	Non Self-Implemented Cleanup to Remedy Standard A, Tier 1 X Tier 2 Tier 3
	Cleanup to Remedy Standard B, Tier 1 Tier 2 Tier 3
PST R	ules (30 TAC Chapter 334) - Check Appropriate Standard:
	Cleanup to generic risk-based levels (following PST Plan A requirements).
	Cleanup to site specific risk-based levels not relying on engineering or institutional controls (following PST Plan B requirements).
	Cleanup to site specific risk-based levels which rely on engineering or institutional controls (following PST Plan B requirements).
	Other (explain)
Fede	ral Brownfields Tax Deduction
Taxpay If yes, p	requesting TCEQ certification that the site is eligible for a federal tax deduction under the ver Relief Act of 1997 (HR 2014)? Yes _X No olease submit a Brownfields Tax Deduction Pre-Certification Form. This form may be downloaded ttp://www.tceq.state.tx.us/permitting/remed/vcp/vcp/html.
State	Property Tax Abatements for Brownfields
abatem Texas	ou interested in signing an agreement with the local taxing authority to receive a property tax sent after issuance of the VCP Certificate of Completion, as allowed under Section 312.211 of the Tax Code? Yes No _X please read the application instructions for more information about this tax abatement.

Environmental Assessment

An environmental assessment that includes the following information must be attached to this application:

- a legal description of the site, including a site map drawn to scale;
- the physical characteristics of the site;
- the operational history of the site, to the extent the history is known by the applicant;
- information that the applicant is aware of concerning the nature and extent of any contamination and/or release at the site and in areas contiguous to the site; and
- relevant information the applicant is aware of concerning the potential for human and environmental exposure to contamination at or emanating from the site.

Intent to Participate

The undersigned requests oversight by the TCEQ of investigation and cleanup activities of possible contamination at the property described above and intends to negotiate in good faith, a written agreement with the TCEQ to provide technical and regulatory oversight. This Intent to Participate does not constitute such an agreement and neither TCEQ nor the undersigned will be bound to proceed with VCP oversight unless such an agreement is executed. Applicants should be aware that in order for the TCEQ to issue a VCP Certificate of Completion for an entire site, the applicant must provide adequate information to document that the entire site meets the applicable standards. As an alternative, the applicant may pursue a VCP Certificate of Completion for only a portion of the site, as a partial response action area. The agreement will describe the project activities of each party and will require Applicant A (unless indicated otherwise on page 2 of this form) to reimburse the TCEQ for all of its oversight costs. By completing and signing this Intent to Participate and that excepting areal limitations with partial response actions, all environmental media which exceed the critical Protective Concentration Levels shall be addressed through appropriate response actions. The undersigned affirms the applicant's financial capability to perform the voluntary cleanup. The Executive Director may also request additional information to support this affirmation.

With this Intent to Participate, the undersigned does not admit or assume liability for investigation or cleanup of the site. In addition, the undersigned may terminate the Intent to Participate at any time. If the TCEQ rejects the application, it will notify the applicant and explain the reasons for rejection and will refund half of the application deposit, unless the applicant indicates a desire to resubmit a corrected application. An applicant can resubmit an application once without submitting an additional application fee, if the applicant resubmits within 45 days after the rejection notice date.

Deposit of Oversight Costs

The applicant must submit with this application, a deposit in the amount of one thousand dollars (\$1,000), made payable to the Texas Commission on Environmental Quality. Deposits may be made in the form of company or personal checks. If a deposit check is returned due to insufficient funds, the application will be considered incomplete and will be rejected. Cash deposits will not be accepted.

Please execute this Intent to Participate in the space below and return it and <u>all</u> associated documents (e.g., environmental assessment reports) to:

Attention: Cashier
Texas Commission on Environmental Quality
MC- 214
P.O. Box 13088
Austin, Texas 78711-3088

For overnight or express mail please use the following street address:

Attention: Cashier
Texas Commission on Environmental Quality
MC-214
12100 Park 35 Circle
Austin, Texas 78753

Note: Please do not send the application and associated documents directly to the VCP. This will only result in a delay in processing your application.

Correctness of Information

The undersigned affirm that the information contained in this application is true and accurate to the best of their knowledge.

Applicant's Signatures

Appucant A	
By: Zyda Rith	Name: LYNDA RIEKELS (print or type)
Date: 2/21/03	Title: VICE PRESIDENT
Company: DELFASCO FORSE DIVISION, DELFASCO INC.	Phone: (817) 268-0781

Applicant B	
By:(signature)	Name: (print or type)
Date:	Title:
Company:	Phone: ()
Applicant C	
By:(signature)	Name: (print or type)
Date:	Title:
Company:	Phone: ()

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY VOLUNTARY CLEANUP PROGRAM

Program Application - Additional Applicants Form

Applicant D	
By:(signature)	Name:(print or type)
Date:	Title:
Company:	Phone: ()_
Applicant E	
By:(signature)	Name:(print or type)
Date:	Title
Company:	Phone: ()
Applicant F	
By:(signature)	Name: (print or type)
Date:	Title:
Company:	Phone: ()